

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	70017	
O.I.P.E. CLASSIFIER	<i>[Signature]</i>		
FORMALITY REVIEW		70017	10/30/00
RESPONSE FORMALITY REVIEW			11-01

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral).... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

APPLICATION
09/66

TITLE

WILL
CATHI
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ANDRI

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Claim	Date
Final Original	
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If more than 150 claims or 10 actions
staple additional sheet here